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CLIENT'S COPY

Pattillo, Brown & Hill, L.L.P Certified Public Accountants 2209 Birdcreek Terrace Temple, TX 76502

June 14, 2019

Communities In Schools of the Heart of Texas 1001 Washington Avenue Waco, TX 76701

Communities In Schools of the Heart of Texas:

Enclosed is the organization's 2017 Exempt Organization return.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-EO to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-EO to us by July 15, 2019.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return.

We have prepared the return from information you furnished us without verification. Upon examination of the return by tax authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such possible examinations.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Yours truly,

Melanie McCarthy, CPA

Form 8879-EC

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2017, or fiscal year beginning SEP 1 , 2017, and ending **AUG** 31 , 20**18** Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879EO for the latest information.

Employer identification number

-*3411

Department of the Treasury Internal Revenue Service Name of exempt organization

CON	1MUN]	TIES	IN	SCHOOLS
$\cap \overline{r}$	mitra			

OF

THE HEART OF TEXAS

Name and title of officer

MIKE HARPER CEO

Type of Return and Return Information (Whole Dollars Only) Part I

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	3,001,587.
2a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b	
За	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here b Balance Due (Form 8868, line 3c)	5b	
		-	

Part II **Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X lauthorize PATTILLO, BROWN & HILL, L.L.P.	to enter my PIN	63411
ERO firm name		Enter five numbers, bu do not enter all zeros
as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within t is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also au enter my PIN on the return's disclosure consent screen.		
As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 indicated within this return that a copy of the return is being filed with a state agency(ies) regulating cha program, I will enter my PIN on the return's disclosure consent screen.	•	
Officer's signature Date		
Part III Certification and Authentication		
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros		
I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for th confirm that I am submitting this return in accordance with the requirements of Pub. 4163 , Modernized e-File (Mef <i>e-file</i> Providers for Business Returns.	•	
ERO's signature Date Date		
ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do	o So	

			EXTENDED TO JULY 15, 201	.9	
	Ω	00	Return of Organization Exempt From	n Income Tax	OMB No. 1545-0047
Forr	n J	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code		ons) 2017
Depa	rtment	of the Treasury	Do not enter social security numbers on this form as it m	nay be made public.	Open to Public
Intern	al Reve	enue Service	Go to www.irs.gov/Form990 for instructions and the la		Inspection
AF	or th	e 2017 calend	ar year, or tax year beginning ${}_{ m SEP}$ 1 , ${}_{ m 2017}$ and ending	<u>AUG 31, 2018</u>	
Bc	heck if pplicab		forganization	D Employer identifi	cation number
	⊐Addre	COM	UNITIES IN SCHOOLS		
	_chang Name		HE HEART OF TEXAS		
	_chang	ge Doing b	usiness as		**3411
	_return Final	Number		Suite E Telephone numbe	
	Jreturn termir	2	WASHINGTON AVENUE		753-6002
	ated Amen	City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	3,019,336.
	_lreturn]Applio		, TX 76701	H(a) Is this a group re	
	⊥tiò'n pendi	ing CAME	nd address of principal officer:MIKE HARPER AS C ABOVE	for subordinates	
	-			H(b) Are all subordinates in	
			X 501(c)(3) $_$ 501(c) () ◀ (insert no.) $_$ 4947(a)(1) or $_$ CISHOT•ORG		list. (see instructions)
				H(c) Group exemption Year of formation: 1989	
	nt I	Summary			A State of legal dominine. I A
	1		e the organization's mission or most significant activities: COMMUNIT	TES IN SCHOOL	S SURROUNDS
Governance	•	STUDENT	S WITH A COMMUNITY OF SUPPORT, EMPOWE	RING THEM TO	STAY IN
naı	2		x		
ver				3	17
ğ			lependent voting members of the governing body (Part VI, line 1b)		17
80			of individuals employed in calendar year 2017 (Part V, line 2a)		200
Activities &			of volunteers (estimate if necessary)		280
cti			d business revenue from Part VIII, column (C), line 12		0.
◄			business taxable income from Form 990-T, line 34		0.
				Prior Year	Current Year
e	8	Contributions	and grants (Part VIII, line 1h)	2,732,563.	2,980,927.
nuə	9		ce revenue (Part VIII, line 2g)	38,513.	0.
Revenue	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)	1,204.	-11,935.
	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	15,046.	32,595.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,787,326.	3,001,587.
			milar amounts paid (Part IX, column (A), lines 1·3)	0.	0.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)	0.	0.
es	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)	2,306,200.	
Expenses	16a	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) ▶ <u>11,873.</u>	0.	0.
Хр				420.200	401 (50
			es (Part IX, column (A), lines 11a-11d, 11f-24e)	438,302. 2,744,502.	481,652.
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)	42,824.	2,914,672. 86,915.
<u> </u>	19	Revenue less	expenses. Subtract line 18 from line 12		· · · · · ·
Net Assets or Fund Balances		-		Beginning of Current Year 519,823.	End of Year 558,043.
Bala		Total assets (206,386.	157,691.
let ⊿ ind			(Part X, line 26)	313,437.	400,352.
	22 Irt II		fund balances. Subtract line 21 from line 20	,,,,,	400,332.
			I declare that I have examined this return, including accompanying schedules and st	atements and to the hest of m	v knowledge and belief it is
			. Declaration of preparer (other than officer) is based on all information of which prej		י הווטיאובעטב מווע אלוובו, ול 51
u u d,	001100				
Sig	ı	Signatur	e of officer	Date	
	-	1 1			

Here	MIKE HARPER, CEO							
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN				
Paid	MELANIE MCCARTHY, CPA			self-employed P00699498				
Preparer	Firm's name 🍃 PATTILLO, BROWN		Firn	m's EIN ► **-**0599				
Use Only	Firm's address 2209 BIRDCREEK T	ERRACE						
	TEMPLE, TX 76502 Phone no. (254) 791-3460							
May the IF	May the IRS discuss this return with the preparer shown above? (see instructions)							
732001 11-2	32001 11-28-17LHAFor Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2017)							

11-28-17 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2017) SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	COMMUNITIES IN SCHOOLS
-	990 (2017) OF THE HEART OF TEXAS **-**3411 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: TO SURROUND STUDENTS WITH A COMMUNITY OF SUPPORT, EMPOWERING THEM TO
	STAY IN SCHOOL AND ACHIEVE IN LIFE.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 1,454,771. including grants of \$) (Revenue \$ 16,935.)
	CIS SCHOOL-BASED SERVICES SERVED 19 CAMPUSES IN 6 SCHOOL DISTRICTS AND
	CASE-MANAGED A TOTAL OF 3,302 AT-RISK STUDENTS. EACH STUDENT WE SERVE
	THROUGH OUR CORE CIS PROGRAM IS ASSESSED AND HAS A PERSONALIZED SERVICE
	PLAN CREATED TO MEET THEIR INDIVIDUAL NEEDS. CIS WAS ABLE TO IMPACT THE
	LIVES OF THESE STUDENTS SO THAT: 99% STAYED IN SCHOOL; 95% WERE
	PROMOTED TO THE NEXT GRADE; 94% OF SENIORS GRADUATED; 83% IMPROVED
	THEIR ACADEMIC PERFORMANCE; AND 83% SHOWED IMPROVEMENT IN THEIR
	BEHAVIOR.
4b	(Code:) (Expenses \$ 469,367. including grants of \$) (Revenue \$)
40	(Code:) (Expenses \$409, 567. including grants of \$) (Revenue \$)
	OF SCHOOL, TO PREPARE THEM FOR EMPLOYMENT AND POST-SECONDARY EDUCATION
	AND TRAINING. WE ACCOMPLISH THIS THROUGH ACADEMIC ASSISTANCE, GED
	PREPARATION, CAREER EXPLORATION, AND ASSISTANCE WITH JOB PLACEMENT
	OPPORTUNITIES. THE PROGRAM SERVES YOUTH IN THE SIX-COUNTY HEART OF
	TEXAS WORKFORCE DEVELOPMENT AREA. CIS CONTRACTED TO SERVE 175 YOUTH AND
	SERVED A TOTAL OF 178 YOUTH PARTICIPANTS.
4c	
	COMMUNITY YOUTH DEVELOPMENT PROGRAM PROVIDES JUVENILE DELINQUENCY
	PREVENTION SERVICES TO YOUTH IN THE 76705 AND 76707 ZIP CODE AREAS. CYD
	PROGRAM SERVICES INCLUDE YOUTH LEADERSHIP DEVELOPMENT, MENTORING,
	ACADEMIC SUPPORT, AND THE YOUTH ADVISORY COMMITTEE. THE CYD PROGRAM
	SERVED 1,045 STUDENTS.
4d	Other program services (Describe in Schedule O.)
4u	(Expenses \$ 206,947 • including grants of \$) (Revenue \$)
4e	
	Form 990 (2017)

COMMUNITIES	IN	SCHOOLS
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 Form 990 (2017)
 OF
 THE
 HEART
 OF
 TEXAS

 Part IV
 Checklist of Required Schedules
 Checklist
 Checklis

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation? 1 X 2 X 2 1s the organization required to complete Schedule <i>B</i> . Schedule <i>G</i> Contributors? 2 X 2 X 3 Did the organization required to complete Schedule <i>C</i> . Part <i>I</i> 2 X 2 X 4 Section 501(c)(4) organizations. Did the organization engage in lobbying activities on behalf of or in opposition to candidates for animal amounts as defined in Neuroue Proceedure C. Part <i>I</i> 4 X 5 State organization required to complete Schedule C. Part <i>I</i> 5 X 6 Did the organization maintain any done advised funds or accounts for which dones have the right to provide advice or hold a conservation easement, including easements to preserve open space, the environment, histocic land areas, or historic all treasures, or other schedule <i>D</i> , Part <i>I</i> 6 X 7 Did the organization maintain any done advised funds or account? <i>II</i> "Nes." complete Schedule <i>D</i> , Part <i>II</i> 7 X 8 Did the organization maintain any done advised organization, hold assets in langargen in disbidity, serve as a custodian for amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amount in Part X, line 12, for escrew or custodial account liability, serve as a custodian for amount in Part X, line 12,		· ·		Yes	No
If Yes, "complete Schedule A 1 X 2 Is the organization engage in direct or indirect political campaign activities on behalf of or in opportion to candidates for public office? If Yes," complete Schedule C, Part I 3 X 3 Did the organization ascence for Schedule C, Part I 3 X 4 Section SOI(K) organization. Did the organization ongage in loobying activities, or have a section SOI(h) election in effect 4 X 5 Is the organization marking any doorn advice of Soft(k) 501(c)(k) 501(c)(k) of SOI(c)(k) organization transform any doorn advice in Bark nucles or account? If I'ves," complete Schedule D, Part II 6 X 7 Did the organization marking notice in structures? II 'ves," complete Schedule D, Part II 7 X 8 Did the organization marking notice in Part X, line 21, for secrow or custodial account liability, serve as a custodian for amounts notice in Part X, line 10 (Part II), Part II X 9 Did the organization report an amount in runst market nuclead organization, nuclead prophysic portuber schedule D, Part V 10 X 10 Did the organization secrept or thords acor	1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)?			
2 Is the organization required to complete Schedule B, Schedule C Contributor® 2 X 3 Did the organization required to complete Schedule C, Part II 3 X 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(b) election in effect during the taxy earl IV %s; "complete Schedule C, Part II 4 X 5 Is the organization ascetion 501(c)(4, 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Neorune Procedure B-197 IV %s; "complete Schedule D, Part I 6 X 7 Did the organization maintain any done advised funds or ascounts for which dones have the right to provide advice or heid a conservation assement, including assements to preserve gens pace, the environment, historic land areas, or historic at treasures, or other similar asset? If Yes, "complete Schedule D, Part II 6 X 9 Did the organization maintain any done advised funds or ascount in Part X, ine 21, for escow or outsofial account liability, serve as a custodian for amounts in listed in Part X, ine 11, "ks," complete Schedule D, Part II 7 X 9 Did the organization maintain any other advised graphization, hold assets in temporally restricted endowments, permanent endowments? If Yes," complete Schedule D, Part IV 10 X 9 Did the organization neport an amount for land, buildings, and equipment in Part X, line 13 that is 5% o	•		1	х	
 3) Did the organization regage in direct or indirect political campaign activities on behalf of or in opposition to candidates for during the tax year? If 'Yes, 'complete Schedule C, Part II	2	Is the organization required to complete Schedule B. Schedule of Contributors?			
Section 50 (Le(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If Yes," complete Schedule C, Part II. I Is the organization a section 501(c)(h). 501(c)(g) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If 'Yes," complete Schedule C, Part III I Did the organization maintain any door advised funds or any similar funds or accounts for which doors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which doors have the right of provide advice on the distribution or investment of amounts in such funds or accounts for which doors have the right or provide advice on the distribution or investment of amounts in such funds or accounts for which doors have the right or provide advice on the distribution or investment of amounts in such funds or accounts for which doors have the right or provide advice on the distribution or investment or down masses, or other similar assets? If 'Yes,' complete Schedule D, Part II 7 X Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custolian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? 9 X Did the organization report an amount for leads organization, hold assets in temporarity restricted endowments, Pirvs, ' complete Schedule D, Part V 10 X Did the organization report an amount for leads the fart X, line 121 that is 5% or more of its total assets reported in Part X, line 110 M 'Yes, ' complete Schedule D, P	3				
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the taxy vero? If ''sec, 'complete Schedule C, Part II 4 X 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 30:157 II ''tes,' complete Schedule D, Part II 6 X 6 Did the organization receives on bold a conservation easement, including assembrats to preserve open space, the environment, historic and areas, or historic structures? II ''Yes,' complete Schedule D, Part II 7 X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If ''ves,' complete Schedule D, Part II 7 X 10 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If ''ves,' complete Schedule D, Part II 10 X 10 Did the organization report an amount for least, bialidigs, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part V 11 X 11 Ithe organization report an amount for least. Theart X, line 12 that is 5% or more of its total assets reported i		public office? If "Yes," complete Schedule C, Part I	3		Х
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 30:197 (1*%*, "complete Schedule C, Part II 5 X 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right or bit the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listel in Part X, jine 21, for escrow or custodial account liability, serve as a custodian for amounts not listel in Part X, jine 21, for escrow or custodial account liability, serve as a custodian for amounts not provide credit counseling, debt management, credit repair, or debt negoliation services? If "Yes," complete Schedule D, Part IV 8 X 10 Did the organization, equal andowments? If "Yes," complete Schedule D, Part V, NI, VII, NI, X, or X as applicable. 10 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII 11 X 11 Did the organization report an amount for land; statements for the tax year include a schedule D, Part X 11	4				
similar amounts as defined in Revenue Procedure 98-197 /f "Yes," complete Schedule C, Part III 5 X 6 Did the organization maintain any donor advised funds or ary similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for "Yes," complete Schedule D, Part II 6 X 7 Did the organization maintain and erasp, or historic structures IV "Yes," complete Schedule D, Part III 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 8 X 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 10 X 11 If the organization report an amount for investments - roogram related in Part X, line 10? If "Yes," complete Schedule D, Part X 11 X 12 Did the organization report an amount for other assets in Part X, line 13? If at is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11 X 13 Did the organization schole assets in Part X,			4		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts // "res," complete Schedule D, Part II 7 Did the organization receiver or hold a conservation easement, including assements to preserve open space, the environment, historic and areas, or historic structures? If "Yes," complete Schedule D, Part II. 6 X 8 Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide or end counseling, debt management, credit repair, or debt negotiation services? 9 X 9 Did the organization report an amount for laws of ant, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part V 8 X 10 Did the organization answer to any of the following questions is "Yes," then complete Schedule D, Part V, VII, VII, VII, VII, VII, X, or X as applicable. 10 X 11 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 X 12 Did the organization report an amount for investments - other securities in Part X, line 13? If Yes," complete Schedule D, Part VI 11 X 13 Did the organization report an amount for investments - other securities in Part X, line 13? If Yes," complete Schedule D, Part VI 11 X	5				
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7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar asets? If "Yes," complete Schedule D, Part II. 8 X 9 Did the organization maintain collections of works of art, historical treasures, or other similar asets? If "Yes," complete Schedule D, Part II. 8 X 9 Did the organization, directive or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 10 X 11 The organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11a X 11 Did the organization report an amount for investments - organs related in Part X, line 25 for the tax year: Induced a foronton that addressee the organization report an amount for other assets in Part X, line 25 for Yes," complete Schedule D, Part X 11a X 12 Did the organization report an amount for other assets in Part X, line 25 for Yes," complete Schedule D, Part X	6				37
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 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 	b		40		v
 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i> 14a X 14b X 15c X 16 X 17 X 18 X 18 X 18 X 18 X 18 X 17 X 18 X 18 X 18 X 18 X 17 X <td>10</td><td></td><td></td><td></td><td></td>	10				
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or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 17	5				
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 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," 	17				
1c and 8a? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," I			17		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	· · ·		v	
	10		18	Δ	
	19		19		x

Form **990** (2017)

COMMUNITIES IN SCHOOLS

		*3411	Р	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer	,		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	00-		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization			
	If "Yes," complete Schedule R, Part V, line 2			x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form **990** (2017)

OF THE HEART OF TEXAS

	Check if Schedule O contains a response or note to any line in this Part V			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 10)		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b (ז		
	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
	(gambling) winnings to prize winners?		1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 200)		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	3)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country:				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	5b		X
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-			
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set		7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	-			
	to file Form 8282?		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	_		v
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of the state of the stat		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
0			8		
9	Sponsoring organizations maintaining donor advised funds.		9a		
a b	Did the sponsoring organization make any taxable distributions under section 4966?		9a 9b		
10	Section 501(c)(7) organizations. Enter:		30		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-		
11	Section 501(c)(12) organizations. Enter:	100	-		
 а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		-		
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?		13a	1	
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
с	Enter the amount of reserves on hand	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b		

Form **990** (2017)

COMMUNITIES IN SCHOOLS OF THE HEART OF TEXAS ments Regarding Other IRS Filings and Tax Compliance

Form 990	(2017)
Part V	Staten

2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		x
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	14		
	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
Ŭ	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	5		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
D.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	114		
12a		12a	х	
	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i>	12.0		
Ŭ	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	X	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
2	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b	X	
D.	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	100		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
100	taxable entity during the year?	16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		
D.	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
		16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availah	ماد	
10	for public inspection. Indicate how you made these available. Check all that apply.	availab		
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.	aman	Jul	
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
20	MIKE HARPER - 254-753-6002			
	1001 WASHINGTON AVE, WACO, TX 76701			
732004	5 11-28-17	Form	990	(2017)
102000	6	. 0111		()
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COMMUNITIES IN SCHOOLS OF THE HEART OF TEXAS

1a Enter the number of voting members of the governing body at the end of the tax year

If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.

b Enter the number of voting members included in line 1a, above, who are independent

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

Form 990 (2017)

-*3411

1a

1b

Page 6

X

No

Yes

17

17

Part VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" respons
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Form 990 (2	2017)	OF	THE	HEART	OF	TEXAS			**_**
Part VII	Compensation	of C	Officers	s, Directo	ors, 1	Frustees,	Key Employees,	Highest C	compensated
	Employees, an	d In	depend	dent Con	tract	tors			

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos	itior) thon	000	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cer an	id a d	recto	or/trus	stee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	ruste	ll trus		/ee	mpen		(1000 10100)		and related
	below	d ual 1	Institutional trustee	-	Key employee	est co oyee	er			organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			-
(1) BETTY BAUER	1.00									
BOARD MEMBER		X						0.	0.	0.
(2) RODNEY CLARK	1.00									
CHAIR		Х		Х				0.	0.	0.
(3) HOLLY DUNHAM	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(4) CARY DUPUY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(5) DR. CYNTHIA HARR	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) CHERYL HOLY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) HON. GARY COLEY	1.00									_
BOARD MEMBER		х						0.	0.	0.
(8) BRUCE GIETZEN	1.00									_
BOARD MEMBER		X						0.	0.	0.
(9) CATHERINE BAUER	1.00									
BOARD MEMBER		X						0.	0.	0.
(10) CARYN BROWN	1.00									•
SECRETARY		Х		X				0.	0.	0.
(11) PETER RUSEK	1.00									•
BOARD MEMBER		Х						0.	0.	0.
(12) CONNIE BERRY	1.00									•
BOARD MEMBER	1 00	X						0.	0.	0.
(13) HEATHER ROBERTSON	1.00									•
TREASURER	1 00	X		X				0.	0.	0.
(14) FRANCES CALLAN	1.00									•
BOARD MEMBER	1 00	X						0.	0.	0.
(15) JACKYE CLAYTON	1.00									0
BOARD MEMBER	1 00	X						0.	0.	0.
(16) MICHAEL GREEN	1.00	.,,							_	•
BOARD MEMBER	1 00	X	<u> </u>					0.	0.	0.
(17) DR PEGGY JOHNSON	1.00							_	_	•
BOARD MEMBER		X						0.	0.	0. 5 000 (0017)

732007 11-28-17

Form 990 (2017)

CON	1MUN	TIES	IN	SCHOOLS
OF	THE	HEART	OF	TEXAS

Form 990 (2017) OF THE H	EART OF	ΤI	EX/	AS					**_**	*34	111	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	rees	, an	d Hi	ighe	st (Compensated Employe	es (continued)			
(A) Name and title	(B) Average hours per	(do box	not c	Pos heck ss pe	C) ition more erson	ן than is bot	one th an	(D) Reportable compensation	(E) Reportable compensation		Estir	F) nated unt of
	week (list any hours for related organizations below line)	tee or director	Institutional trustee	Officer		Highest compensated		the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS(C)	compe fror organ and r	her ensation n the nization related izations
(18) MIKE HARPER	40.00							02 656			1 5	011
CHIEF EXECUTIVE OFFICER (19) HANNA KUHL	40.00			X		-		93,656.		0.	15	,911.
CHIEF OPERATING OFFICER	40.00			x				64,146.		ο.	4	,568.
(20) AARON MIZE	40.00			122		\vdash		04,140.		••		,500.
CHIEF STRATEGY OFFICER				x				60,743.		0.	4	,568.
1b Sub-total	•							218,545.		0.	25	,047.
c Total from continuation sheets to Part V								0.218,545.		0. 0.	25	0. ,047.
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but n 								-		-	23	,04/•
compensation from the organization						,			, ,			0
										п	Y	es No
3 Did the organization list any former officer,	,						·	0				x
line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s 4 For any individual listed on line 1a, is the su	ucn individual up of reportab	 0 cr	 		ation	 	d of	ther compensation from	the organization		3	
and related organizations greater than \$15									the organization		4	x
5 Did any person listed on line 1a receive or a									dual for services		-	
rendered to the organization? If "Yes," com	plete Schedul	e J f	for s	uch	pers	son					5	X
Section B. Independent Contractors									• • • • • • •			
 Complete this table for your five highest co the organization. Report compensation for 										bensa	ation fro	m
(A) Name and business			ONI					(B) Description of s		Сс	(C) ompens	ation
2 Total number of independent contractors (i \$100,000 of compensation from the organi		ot li	mite	d to		se li 0	ste	d above) who received m	nore than			

732008 11-28-17

COM	(MUN	TIES	IN	SCHOOLS
OF	THE	HEART	OF	TEXAS

Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Revenue excluded (A) Related or Unrelated Total revenue from tax under exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b 5,750. c Fundraising events 1c 1d d Related organizations 1e 2,947,011. e Government grants (contributions) f All other contributions, gifts, grants, and 28,166. similar amounts not included above g Noncash contributions included in lines 1a-1f: \$ 2,980,927. h Total. Add lines 1a-1f ► Business Code Program Service Revenue 2 a b С f All other program service revenue g Total. Add lines 2a-2f . Investment income (including dividends, interest, and 3 other similar amounts) ► 4 Income from investment of tax-exempt bond proceeds ► 5 Royalties ► (i) Real (ii) Personal 20,230. 6 a Gross rents 0. **b** Less: rental expenses 20,230. c Rental income or (loss) 20,230. 20,230. d Net rental income or (loss) ► 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis 11,935 and sales expenses -11,935. c Gain or (loss) -11,935. -11,935.d Net gain or (loss) ► **8** a Gross income from fundraising events (not Revenue including \$ 5,750. of contributions reported on line 1c). See 9,539 Part IV, line 18 a Other 5,814. b Less: direct expenses b 3,725. 3,725. c Net income or (loss) from fundraising events ► 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses h c Net income or (loss) from gaming activities ... ► 10 a Gross sales of inventory, less returns and allowances _____ a b Less: cost of goods sold b c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 6,222. 900099 6,222. 11 a OTHER INCOME **b** CASHBACK REWARD 900099 2,418. 2,418. С d All other revenue 8,640. e Total. Add lines 11a-11d 16,935. 3,001,587. 0. Total revenue. See instructions. 3,725 ► 12

732009 11-28-17

Form 990 (2017)

Statement of Revenue

Part VIII

Form 990 (2017)

COMMUNITIES IN SCHOOLS OF THE HEART OF TEXAS

	0990 (2017) OF THE HEAR	T OF TEXAS		**_**	*3411 Page 10
	rt IX Statement of Functional Expens				
Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	omplete column (A).	
	Check if Schedule O contains a respon	ise or note to any line in	this Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
Ũ	trustees, and key employees	218,545.	57,759.	160,786.	
6	Compensation not included above, to disqualified				
Ŭ	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,806,686.	1,806,686.		
8	Pension plan accruals and contributions (include	_,,	_,,		
Ŭ	section 401(k) and 403(b) employer contributions)	30,687.	28,110.	2.577.	
9	Other employee benefits	207,667.	190,629.	2,577. 17,038.	
10	Payroll taxes	169,435.	158,415.	11,020.	
11	Fees for services (non-employees):			, •_••	
''a	Management				
b					
c					
	E CONTRACTOR CONTRA				
e e	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
9	column (A) amount, list line 11g expenses on Sch 0.)	56,323.	28,277	28,046.	
12	Advertising and promotion	6,027.	28,277. 5,465.	78.	484
13	Office expenses	5,850.	3,374.	2,473.	3
13 14	Information technology	5,0001	0,0,10		
14 15	Povaltion				
15 16	· · · · · · · · · · · · · · · · · · ·	96,093.	79,791.	16,302.	
17		17,647.	15,819.	1,822.	6
17	Travel Payments of travel or entertainment expenses	1,101,1	1370131	1,0221	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	25,108.	16,780.	8,328.	
22	Insurance	16,978.	,	16,978.	
24	Other expenses. Itemize expenses not covered	_ • / • / • ·			
27	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а		126,499.	123,751.	2,481.	267
b	MATERIALS AND SUPPLIES	56,432.	48,221.	8,210.	1
С	OTHER EXPENSES	33,019.	11,786.	10,220.	11,013
d	TRAINING	15,070.	13,054.	1,917.	99
e	All other expenses	26,606.	21,421.	5,185.	
25	Total functional expenses. Add lines 1 through 24e	2,914,672.	2,609,338.	293,461.	11,873
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	advastional compaign and fundraising colligitation				

educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

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COMMUNITIES IN SCHOOLS OF THE HEART OF TEXAS

-*3411 Page 11

1 4	• * *	Check if Schedule O contains a response or not	o to an	v line in this Part V			
		Oneck in Schedule O contains a response of hot	e io an		(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			121,302.	1	225,611.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	040.050
	4	Accounts receivable, net			291,762.	4	240,259.
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation	ated en	ployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	•	·			
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sec					
ets		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net				7	
◄	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			32,108.	9	34,649.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	19,670.			
	b	Less: accumulated depreciation	10b	14,665.	20,706.	10c	5,005.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			37,703.	14	16,361.
	15	Other assets. See Part IV, line 11			16,242.	15	36,158.
	16	Total assets. Add lines 1 through 15 (must equ			519,823.	16	558,043.
	17	Accounts payable and accrued expenses			206,386.	17	157,691.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
es	22	Loans and other payables to current and former	officer	s, directors, trustees,			
Liabilities		key employees, highest compensated employee					
iab.		Complete Part II of Schedule L				22	
-	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	s 1 7-24)	. Complete Part X of			
		Schedule D			006 006	25	
	26	Total liabilities. Add lines 17 through 25			206,386.	26	157,691.
		Organizations that follow SFAS 117 (ASC 958		k here 🕨 🔽 and			
Ses		complete lines 27 through 29, and lines 33 an			212 427		400 252
ano	27	Unrestricted net assets			313,437.	27	400,352.
Fund Balances	28	Temporarily restricted net assets				28	
pu	29					29	
Ъ		Organizations that do not follow SFAS 117 (A	SC 958	B), check here ▶ └──			
s or		and complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
Net Assets or	31	Paid-in or capital surplus, or land, building, or ed				31	
Vet	32	Retained earnings, endowment, accumulated in			212 127	32	100 250
-	33	Total net assets or fund balances		····· L	313,437.	33	400,352.

558,043. Form **990** (2017)

519,823.

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Total liabilities and net assets/fund balances

Form 990 (2017)
Part X | Balance Sheet

	COMMUNITIES IN SCHOOLS				
Form	990 (2017) OF THE HEART OF TEXAS	**_***	3411	Ра	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,00		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,91		
3	Revenue less expenses. Subtract line 2 from line 1	3			15.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	31	3,4	37.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	40	0,3	52.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
-	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				v
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewer	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			х	
b	Were the organization's financial statements audited by an independent accountant?		. 2 b	<u> </u>	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis				
		o oudit			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		20		
20	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
Jd		iyie Auuli	3a	х	
h	Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			┼──
U U	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		Зb	х	
	or addits, explain with in ochedule of and describe any steps taken to undergo such addits			<u></u>	L

Form **990** (2017)

SC	HE	DULE A								OMB No. 1545-0047
(Fc	rm 99	90 or 990-EZ)			rity Status an					2017
			Co		nization is a section 50			or a section		ZU1
Depa	rtment o	of the Treasury			47(a)(1) nonexempt cha Attach to Form 990 or F					Open to Public
		nue Service			v/Form990 for instruction			nformation.		Inspection
Nar	ne of	the organizati		UNITIES IN					Employer	r identification number
			OF T	HE HEART C	OF TEXAS				*	*-***3411
Pa	rt I	Reason			(All organizations must co	omplete th	is part.) S	ee instruction	S.	
The	orgar				(For lines 1 through 12, o					
1			-		on of churches describe	-				
2		,		,	(Attach Schedule E (Forn		• • •			
3					anization described in s e			ii).		
4		•	•		, onjunction with a hospita)(iii). Enter	the hospital's name,
		city, and stat								
5		An organizati	on operated fo	or the benefit of a co	ollege or university owne	d or opera	ted by a g	overnmental u	unit descrit	ped in
		section 170	(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, sta	te, or local go	vernment or govern	mental unit described in	section 1	70(b)(1)(A))(v).		
7	X	An organizati	on that norma	ally receives a subst	antial part of its support f	irom a gov	rernmenta	l unit or from t	he general	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community	trust describe	ed in section 170(b))(1)(A)(vi). (Complete Par	t II.)				
9		An agricultur	al research org	ganization described	d in section 170(b)(1)(A)(ix) operat	ed in conji	unction with a	land-grant	college
		or university	or a non-land-g	grant college of agri	culture (see instructions)	Enter the	name, cit	y, and state o	f the colleg	je or
		university:								
10		An organizati	on that norma	ally receives: (1) mor	e than 33 1/3% of its sup	port from	contributi	ons, members	ship fees, a	and gross receipts from
				•	ect to certain exceptions,	.,				•
					e (less section 511 tax) fr	om busine	esses acqu	uired by the o	ganization	after June 30, 1975.
				mplete Part III.)						
11	\square	-	-	-	sively to test for public sa	•				
12		•	0	•	sively for the benefit of, to	•		-	•	• •
					ed in section 509(a)(1) o					Dheck the box in
_					of supporting organizatio					, aivina
а				-	supervised, or controlled egularly appoint or elect a	•	-			
			0	complete Part IV, S	• • • • •	amajonty				supporting
b				-	d or controlled in connec	tion with i	te sunnart	ed organizatio	n(s) by ba	avina
~					ganization vested in the s					
					, Sections A and C.				igo ino our	spondu
c		¬ ~	. ,	•	ng organization operated	in connec	tion with.	and functiona	llv integrat	ed with.
		••	-	• •	s). You must complete I				, ,	,
d			-		porting organization oper				rted organ	ization(s)
		that is not	unctionally int	tegrated. The organ	ization generally must sa	tisfy a dist	ribution re	quirement an	d an attent	iveness
		requiremer	t (see instruct	tions). You must co	mplete Part IV, Sections	s A and D	, and Part	V .		
е		Check this	box if the orga	anization received a	written determination fro	om the IRS	that it is a	а Туре I, Туре	II, Type III	
		functionally	integrated, o	r Type III non-functio	onally integrated support	ing organi	zation.			
f	Ente	er the number	of supported of	organizations						
<u> </u>				n about the support		() I. H	a la di sa li sta d	•		
		(i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10	in your govern	anization listed ing document?	(v) Amount of support (see ir	-	(vi) Amount of other
		organizatior			above (see instructions))	Yes	No	support (see ii	istructions)	support (see instructions)
					+					
Tota	al									
								·		·

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 732021 10-06-17 Schedule A (Form 990 or 990-EZ) 2017

COMMUNITIES IN SCHOOLS

Schedule A (Form 990 or 990-EZ) 2017 OF THE HEART OF TEXAS

-*3411 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Calendar year (or fixed year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total 1 difts, grants, contributions, and in the organization's benefit and ether pard to or expended on its behalt 2 Tax revenues levied Or the organization's benefit and ether pard to or expended on its behalt 3 The value of services or facilities turnished by a governmental unit to the organization without charge 4 Total. Acd lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on ine 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subsect the 8 through 4 5 Cs. 109. 181, 172. 87, 042. 2884762. 3093992. 6312077. 5 Cs. 109. 181, 172. 87, 042. 2884762. 3093992. 6312077. 5 Cs. 109. 181, 172. 87, 042. 2884762. 3093992. 6312077. 5 Cs. 109. 181, 172. 87, 042. 2884762. 3093992. 6312077. 5 Cs. 109. 181, 172. 87, 042. 2884762. 3093992. 6312077. 5 Cs. 109. 181, 172. 87, 042. 2884762. 3093992. 6312077. 5 Cs. 109. 181, 172. 87, 042. 2884762. 3093992. 6312077. 5 Cs. 109. 181, 172. 87, 042. 2884762. 3093992. 6312077. 5 Cs. 109. 181, 172. 87, 042. 2884762. 3093992. 6312077. 6 Cross income from interest, dividends, payments received on securities loans, rent, royattes, and income from interest, dividends, payments received on securities loans, rent, royattes, and income from indus 2000000000000000000000000000000000000	Sec	tion A. Public Support						
membership fees received. (Do not include any 'unusual grants.') 65,109. 181,172. 87,042. 2747610. 2984652. 6065585. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 137,152. 109,340. 246,492. The value of services or facilities furnished by a governmental unit to the organization without charge for the organization included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 65,109. 181,172. 87,042. 2884762. 3093992. 6312077. Section B. Total Support 65,109. 181,172. 87,042. 2884762. 3093992. 6312077. Section B. Total Support 65,109. 181,172. 87,042. 2884762. 3093992. 6312077. Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Go son income from innease. A mounts from line 4 65,109. 181,172. 87,042. 2884762. 3033992. 6312077. Calendar year (or fiscal year beginning in) (b) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total assorts is regularly carried on securities loans, rents, royattes, and income from inneas ources. 1,010. 1,170. 4,293.<	Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
include any 'unusual grants.') 65,109. 181,172. 87,042. 2747610. 2984652. 6065585. 2 Tax revenues level for the organization is benefit and either paid to or expended on its behalf 137,152. 109,340. 246,492. 3 The value of services or facilities furnished by a governmental unit to the organization without charge 65,109. 181,172. 87,042. 2884762. 3093992. 6312077. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization without charge 65,109. 181,172. 87,042. 2884762. 3093992. 6312077. 5 Public support. Setmatchine is non-line 4. 65,109. 181,172. 87,042. 2884762. 3093992. 6312077. 6 Public support. Setmatchine is non-line 4. 65,109. 181,172. 87,042. 2884762. 3093992. 6312077. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalles, and income from similar sources and the set or capital and either of an iterest, and there or an the business is regularly carried on interest, and there or an the set of capital asset (Explain in Part V). 1,010. 1,170. 4,293. 1,204. 28,870. 36,547. 9 Net income from invitar sources and the set or capital asset (Explain in Part V). <td< td=""><td>1</td><td>Gifts, grants, contributions, and</td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	1	Gifts, grants, contributions, and						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf Image: Constraint of the organization without charge 3 The value of services or facilities furnished by a governmental unit to the organization without charge Image: Constraint of the organization without charge 4 Total. Add lines 1 through 3 Image: Constraint of the organization without charge Image: Constraint of the organization without charge 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Image: Constraint of the organization included and include and in		membership fees received. (Do not						
a table is benefit and either paid to or expended on its behalf image: imag		include any "unusual grants.")	65,109.	181,172.	87,042.	2747610.	2984652.	6065585.
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and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization	17a	10% -facts-and-circumstances tes	t - 2017. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
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organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization								
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	18							

Schedule A (Form 990 or 990-EZ) 2017

COMMUNITIES IN SC

Schedule A (Form 990 or 990-EZ) 2017 OF THE HEART OF TEXAS Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
Ŭ	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
10	3 received from disgualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6	((-) =	(-)	(-,	(-,	(1) 1 2 2 2 2
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
12	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)				1		
			l a firat accord this	l d fourth or fifth i	tox year as a costic	1 = 501(0)(2) or 2	anization
1-4	First five years. If the Form 990 is for	e e					
800	check this box and stop here	io Support Do	roontago				
	•		•	(0)		1	
	Public support percentage for 2017 (15	%
	Public support percentage from 2016					16	%
	ction D. Computation of Investion		•				
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
19a	1 33 1/3% support tests - 2017. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than a	33 1/3% , and li	ne 17 is not
	more than 33 1/3%, check this box a	nd stop here. The	e organization qua	lifies as a publicly	supported organiz	ation	▶□
b	33 1/3% support tests - 2016. If the						
	line 18 is not more than 33 1/3%, che	eck this box and st	op here. The orga	nization qualifies	as a publicly supp	orted organizat	ion ►
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	this box and see in	structions	▶∟
					. .		

COMMUNITIES IN SCHOOLS Schedule A (Form 990 or 990-EZ) 2017 OF THE HEART OF TEXAS

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Yes

No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, Ioan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

10b

COMMUNITIES IN SCHOOLS

Schedule A (Form 990 or 990-EZ) 2017 OF THE HEART OF TEXAS
Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с	A 35% controlled entity of a person described in (a) or (b) above?If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
		-	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
а	L The organization satisfied the Activities Test. Complete line 2 below.			
b	L The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	truction	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		L
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	Зb		

Schedule A (Form 990 or 990-EZ) 2017

COMMUNITIES IN SCHOOLS Schedule A (Form 990 or 990 EZ) 2017 OF THE HEART OF TEXAS

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	v integrate	d Type III supporting or	anization (see

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2017

COMMUNITIES IN SCHOOLS

Schedule A (Form 990 or 990-EZ) 2017 OF THE HEART OF TEXAS Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions Current Year 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations З Amounts paid to acquire exempt-use assets 4 5 Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. Distributable amount for 2017 from Section C, line 6 9 10 Line 8 amount divided by line 9 amount (i) (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Amount for 2017 Pre-2017 Distributable amount for 2017 from Section C, line 6 1 2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2017 а **b** From 2013 **c** From 2014 d From 2015 e From 2016 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2017 from Section D, line 7: \$ a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2017, if 5 any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2018. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2013 **b** Excess from 2014 c Excess from 2015 d Excess from 2016

Schedule A (Form 990 or 990-EZ) 2017

e Excess from 2017

					SCHOOLS		
Schedule A	(Form 990 or 990-EZ) 2017	OF THE	HEART	OF	TEXAS		**-***3411 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D,	mation. Prov 2, 3b, 3c, 4b, ines 2 and 3; F	/ide the exp 4c, 5a, 6, 9a Part IV, Sect	lanatio a, 9b, 1 ion E,	ons required by P 9c, 11a, 11b, and lines 1c, 2a, 2b, 3	art II, line 10; Part II, line 17a I 11c; Part IV, Section B, line 3a, and 3b; Part V, line 1; Pa Implete this part for any add	a or 17b; Part III, line 12; es 1 and 2; Part IV, Section C, rt V, Section B, line 1e; Part V,

Schedule B (Form 990, 990-EZ. or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

oyer identification number

*	*	_	*	*	*	2	٨	1	1	
•	^	-	^	^	^	3	4	т	T.	

Name	of the	organization
Tunic		organization

Name of the organization	on de la constante de la const	Employer identification nu
	COMMUNITIES IN SCHOOLS	**-***3411
	OF THE HEART OF TEXAS	<u> </u>
Organization type (chec	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	n is covered by the General Rule or a Special Rule.	
Note: Only a section 501	(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.
General Rule		
-	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalin any one contributor. Complete Parts I and II. See instructions for determining a contributor	• • • •
Special Rules		

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

L For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the
year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box
is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,
purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively
religious, charitable, etc., contributions totaling \$5,000 or more during the year 🕨 \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)	
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Name of organization COMMUNITIES IN SCHOOLS OF THE HEART OF TEXAS

-*3411

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Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LA VEGA ISD 400 EAST LOOP 340 WACO, TX 76705	\$ <u>90,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	WACO ISD 501 FRANKIN AVE WACO, TX 76701	\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll On Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll On Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

COMMUNITIES IN SCHOOLS OF THE HEART OF TEXAS

-*3411

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	

	3 (Form 990, 990-EZ, or 990-PF) (2017)			Page 4				
Name of org				Employer identification number				
	NITIES IN SCHOOLS							
	E HEART OF TEXAS			**-**3411				
Part III	Exclusively religious, charitable, etc., contrib the year from any one contributor. Complete col	utions to organizations described umns (a) through (e) and the follow	ving line entry. For organization	or (10) that total more than \$1,000 for				
	completing Part III, enter the total of exclusively religious, o	charitable, etc., contributions of \$1,000 or	less for the year. (Enter this info. on	\$				
	Use duplicate copies of Part III if additional	space is needed.						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
Part I		., -						
	·							
	· · · · · · · · · · · · · · · · ·							
	· ·							
F		(e) Transfer of gift	I					
	Transferee's name, address, and	ZIP + 4	Relationship of tr	ansferor to transferee				
(a) No.								
from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
Part I								
	(e) Transfer of gift							
-	Transferee's name, address, and	ZIP + 4	Relationship of tr	ansferor to transferee				
(a) No. from		(c) Use of gift	(d) Dec	aviation of how with in hold				
Part I	(b) Purpose of gift	(c) Use of gift		cription of how gift is held				
	· · · · · · · · · · · · · · · · ·							
F		(e) Transfer of gift	I					
			•					
	Transferee's name, address, and	ZIP + 4	Relationship of tr	ansferor to transferee				
Γ								
(a) No.								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
Faiti								
	(e) Transfer of gift							
F	Transferee's name, address, and	<u>ZIP + 4</u>	Relationship of tr	ansferor to transferee				
		[

SC	HEDULE D	Supplementa	al Financial Statements		OMB No. 1545-0047
(Forn	n 990)	Complete if the organication	anization answered "Yes" on Form 990.		201/
Depart	ment of the Treasury	Part IV, line 6, 7, 8, 9, 10,	, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.		Open to Public
Interna	Revenue Service		90 for instructions and the latest informat		Inspection
Nam	e of the organizati	n COMMUNITIES IN SCH OF THE HEART OF TE		En	nployer identification number **-***3411
Par	t I Organiza		d Funds or Other Similar Funds of		
1 01		answered "Yes" on Form 990, Part IV, lin			
	organization		(a) Donor advised funds	(b) Fu	nds and other accounts
1	Total number at er	d of year			
2		contributions to (during year)			
3		grants from (during year)			
4		end of year			
5	Did the organization	n inform all donors and donor advisors in	writing that the assets held in donor advised	l funds	
	are the organization	's property, subject to the organization's	exclusive legal control?		Yes II No
6	Ũ	0 / /	dvisors in writing that grant funds can be us	,	
			r donor advisor, or for any other purpose co	5	
Par	impermissible priv				
			panization answered "Yes" on Form 990, Pa	rt IV, line	1.
1		ervation easements held by the organizati of land for public use (e.g., recreation or e		colly imp	artant land area
		natural habitat	ducation) Preservation of a histori	, ,	
		of open space			Siluciule
2			ied conservation contribution in the form of	a conser	vation easement on the last
-	day of the tax year	• •			Held at the End of the Tax Year
а				2a	<u>+</u>
b					<u> </u>
с			ucture included in (a)		
d	Number of conser	ation easements included in (c) acquired a	after 7/25/06, and not on a historic structure	•	
	listed in the Nation	al Register		2d	
3	Number of conser	ation easements modified, transferred, rel	eased, extinguished, or terminated by the c	organizatio	on during the tax
	year 🕨				
4		here property subject to conservation eas	·		
5	0	on have a written policy regarding the per			Yes No
6	•	rcement of the conservation easements it	t holds?		
U		nours devoted to monitoring, inspecting,	handling of violations, and emotering conse	I VALION CA	sements during the year
7	Amount of expens	 es incurred in monitoring, inspecting, hanc	lling of violations, and enforcing conservation	n easeme	ents during the year
-	▶\$				····· · ······························
8	Does each conser	ation easement reported on line 2(d) abov	ve satisfy the requirements of section 170(h)	(4)(B)(i)	
	and section 170(h)	4)(B)(ii)?	·····		Yes 🗌 No
9			on easements in its revenue and expense s		
	include, if applicat	e, the text of the footnote to the organizat	tion's financial statements that describes th	e organiza	ation's accounting for
Des	conservation ease			0	
Par		_	f Art, Historical Treasures, or Oth	er Sim	lar Assets.
		the organization answered "Yes" on Form			
1a			C 958), not to report in its revenue stateme		
		note to its financial statements that descri	hibition, education, or research in furtherance		c service, provide, in Part Alli,
b			SC 958), to report in its revenue statement a	nd haland	e sheet works of art historical
	-		ducation, or research in furtherance of publi		
	relating to these it	-		,	
	-			►	\$
					\$
2	If the organization		asures, or other similar assets for financial g		de
		nts required to be reported under SFAS 1			
а	Revenue included	on Form 990, Part VIII, line 1		►	\$
				🕨	
LHA	For Paperwork Re	duction Act Notice, see the Instruction	s for Form 990.		Schedule D (Form 990) 2017

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 732051 10-09-17

	COMMUNIT	IES IN SC	HOOL	S					
Sche	dule D (Form 990) 2017 OF THE H	EART OF T	EXAS				**_	***3411	Page 2
Par	t III Organizations Maintaining Co	llections of A	rt, His	torical Tr	reasures, o	or Other			
3	Using the organization's acquisition, accession								
	(check all that apply):	,	,	,	5	5			
а	Public exhibition	(a 🗌	l oan or exc	hange progra	ams			
b	Scholarly research				indige progre				
c	Preservation for future generations	·		01101					
4	Provide a description of the organization's colle	actions and expla	in how th	how further t	he organizati	on's avomr	ot purpose in	Part XIII	
5	During the year, did the organization solicit or n							r art All.	
5	to be sold to raise funds rather than to be main							Yes	🗌 No
Dar	t IV Escrow and Custodial Arrange								
1 41	reported an amount on Form 990, Part >	•		organizatio	on answered	tes on F	5m 990, Part	TV, III e 9, Or	
та	Is the organization an agent, trustee, custodian								
	on Form 990, Part X?							Yes	└── No
b	If "Yes," explain the arrangement in Part XIII an	id complete the fo	ollowing	table:			· · · · ·		
								Amount	
С	Beginning balance						1c		
d	Additions during the year						1d		
е	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amount on Forr	m 990, Part X, line	e 21, for	escrow or c	ustodial acco	ount liability	?	Yes	No No
b	If "Yes," explain the arrangement in Part XIII. C	heck here if the e	xplanatio	on has beer	n provided on	Part XIII .			
Par	t V Endowment Funds. Complete if the	ne organization a	nswered	"Yes" on Fo	orm 990, Part	IV, line 10			
		(a) Current year	(b) P	rior year	(c) Two year	rs back (d	Three years b	ack 🛛 (e) Four ye	ears back
1a	Beginning of year balance								
b	Contributions								
с	Net investment earnings, gains, and losses								
	Grants or scholarships								
	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the currer	nt vear end halan	I ce (line 1	a column (a)) held as:				
	Board designated or quasi-endowment	it year end balan	%	g, column (a)) field as.				
a b	Permanent endowment	%	/0						
u o									
C	Temporarily restricted endowment	% %							
•	The percentages on lines 2a, 2b, and 2c should								
за	Are there endowment funds not in the possess	lion of the organiz	zation tha	at are neid a	and administe	ered for the	organization		
	by:								es No
	(i) unrelated organizations								_
	(ii) related organizations								
b	If "Yes" on line 3a(ii), are the related organization				,			3 b	
4	Describe in Part XIII the intended uses of the or		owment	funds.					
Par	t VI Land, Buildings, and Equipme	nt.							
	Complete if the organization answered	'Yes" on Form 99	0, Part IV	/, line 11a. S	See Form 990), Part X, lir	ne 10.		
	Description of property	(a) Cost or o	other	(b) Cost	t or other	(c) Acc	umulated	(d) Book \	/alue
		basis (invest	ment)	basis	(other)	depre	eciation		
1a	Land								
	Buildings								
	Leasehold improvements								
	Equipment			1	9,670.	1	4,665.	5	,005.
	Other								
	Add lines 1a through 1e. (Column (d) must equ		t X, colur	nn (B), line i	10c.)			5	,005.

Schedule D (Form 990) 2017

CON	MUN	TIES	IN	SCHOOLS
OF	THE	HEART	' OF	' TEXAS

(1) Financial derivatives	
(2) Closely-held equity interests	
(3) Other	
(A)	
(B)	
(C)	
(D)	
(E)	
(F)	
(G)	
(H)	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Schedule D (Form 990) 2017

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DEPOSITS	5,150.
(2) SUTA TRUST ACCOUNT	31,008.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	36,158.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2017

Sche	dule D (Form 990) 2017 OF THE HEART OF TEXAS			**_	***3411 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per R		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ι.			
1	Total revenue, gains, and other support per audited financial statements			1	3,110,927.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	109,340.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	_ 2d			
е	Add lines 2a through 2d			2e	109,340.
3	Subtract line 2e from line 1			3	3,001,587.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				3,001,587.
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten		h Expenses per	Retu	irn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Total expenses and losses per audited financial statements			1	3,024,012.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a	109,340.		
b	Prior year adjustments	_ 2b			
С	Other losses	_ 2c			
d	Other (Describe in Part XIII.)	. 2d			
е	Add lines 2a through 2d			2e	109,340.
3	Subtract line 2e from line 1			3	2,914,672.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	_ 4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,914,672.
Pa	rt XIII Supplemental Information.				

COMMUNITIES IN SCHOOLS

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE INCOME TAXES FOOTNOTE TO THE AUDITED FINANCIAL STATEMENTS READS AS
FOLLOWS: THE ACCOUNTING STANDARDS ON ACCOUNTING FOR UNCERTAINTY IN INCOME
TAXES ADDRESS THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR
EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL
STATEMENTS. UNDER THAT GUIDANCE, CIS-HOT MAY RECOGNIZE THE TAX BENEFIT
FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE
TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES BASED
ON THE TECHNICAL MERITS OF THE POSITION. EXAMPLES OF TAX POSITIONS
INCLUDE THE TAX-EXEMPT STATUS OF CIS-HOT AND VARIOUS POSITIONS RELATED TO
THE POTENTIAL SOURCES OF UNRELATED BUSINESS TAXABLE INCOME (UBTI). THE
TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM A TAX POSITION
732054 10-09-17 Schedule D (Form 990) 2017

COMMUNITIES IN SCHOOLS Schedule D (Form 990) 2017 OF THE HEART OF TEXAS Part XIII Supplemental Information (continued)	**-***3411 Page5
ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A	GREATER THAN 50%
LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT	. THERE WERE NO
UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS I	JIABILITIES FOR FISCAL
YEARS 2018 AND 2017.	

SCHEDULE G	Suppleme	ental Information Regarding	a Fun	drais	ing or Gaming /	Activities	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if the	e organization answered "Yes" on	Form	990, I	Part IV, line 17, 18, o		2017
Department of the Treasury	C	organization entered more than \$1 Attach to Form 990					Open to Public
Internal Revenue Service	0010001111	► Go to www.irs.gov/Form990	for th	e late	st instructions.	F	Inspection
Name of the organization		TIES IN SCHOOLS HEART OF TEXAS					r identification number * * 3 4 1 1
		Complete if the organization answ	ered "Y	′es" o	n Form 990, Part IV,	line 17. Form 9	90-EZ filers are not
 Indicate whether the a Mail solicitatio Internet and end Internet and end Phone solicitatio In-person solicitatio In-person solicitatio Indicate the organization key employees listed If "Yes," list the 10 h 	organization rais ns mail solicitations tions titations have a written o d in Form 990, P ighest paid indiv	sed funds through any of the followi e Solicita s f Solicita g Specia pr oral agreement with any individua Part VII) or entity in connection with p viduals or entities (fundraisers) purs	ition of tion of I fundra I (inclue profess	non-g gover aising ding o sional 1	overnment grants nment grants events fficers, directors, tru: fundraising services?	stees, or	Yes No
compensated at leas	st \$5,000 by the	organization.	-				
(i) Name and address or entity (fundra		(ii) Activity	have c	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	(v) Amount p to (or retained fundraiser listed in col.	by) to (or retained by)
			Yes	No			
				. 🕨			
3 List all states in which or licensing.	n the organizatio	on is registered or licensed to solicit	contrib	oution	s or has been notified	d it is exempt fr	om registration

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2017

COMMUNITIES IN SCHOOLS

Schedule G (Form 990 or 990-EZ) 2017 OF THE HEART OF TEXAS **-**3411 Pag Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

		(a) Event #1 WONDERLAND RUN	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
	1 Gross receipts	15,289.			15,289
	2 Less: Contributions	5,750.			5,750
	3 Gross income (line 1 minus line 2)	9,539.			9,539
	4 Cash prizes				
	5 Noncash prizes	572.			572
	6 Rent/facility costs	1,035.			1,035
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	4,207.			4,20
	10 Direct expense summary. Add lines 4 through				5,814
	11 Net income summary. Subtract line 10 from ITIII Gaming. Complete if the organization				J,12.
	\$15,000 on Form 990-EZ, line 6a.			reperted more than	
Τ		(a) Dinga	(b) Pull tabs/instant		(d) Total gaming (ac
		(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (
4	1 Gross revenue				
	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No	
	7 Direct expense summary. Add lines 2 throug	gh 5 in column (d)		►	
	8 Net gaming income summary. Subtract line	7 from line 1, column (d)			
		ducts gaming activities:	-+-+0		Yes N
	Enter the state(s) in which the organization conduct	activition in each of these			
а	Is the organization licensed to conduct gaming	activities in each of these			
а	Enter the state(s) in which the organization cond Is the organization licensed to conduct gaming If "No," explain:	activities in each of these			
а	Is the organization licensed to conduct gaming	activities in each of these			
a D	Is the organization licensed to conduct gaming	activities in each of these		vear?	Yes

732082 09-13-17

Schedule G (Form 990 or 990-EZ) 2017

	COMMUNITIES IN SCHOOLS			
		- * * *]	3411	Page 3
	Does the organization conduct gaming activities with nonmembers?	L	Yes	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		,	
	to administer charitable gaming?	L	Yes	No No
	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a	<u>ا</u>	%
	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?] Yes	□ No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party \blacktriangleright \$			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Gaming manager compensation 🕨 \$			
	Description of services provided 🕨			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	_	-	
	retain the state gaming license?		Yes	No No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	ie		
	organization's own exempt activities during the tax year 🕨 \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part	III, lines S	9, 9b, 1	0b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

	COI	(MUN	ITIES	IN	SCHOOLS
Schedule G (Form 990 or 990-EZ)				' OF	' TEXAS
Part IV Supplemental Information (continued)					

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.



-*3411

COMMUNITIES IN SCHOOLS OF THE HEART OF TEXAS

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SCHOOL AND ACHIEVE IN LIFE

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

TEXAS HUMAN TRAFFICKING PREVENTION PROGRAM - CIS SERVES AS THE FISCAL

AGENT FOR THE COALITION'S GRANT THROUGH THE U.S. DEPARTMENT OF

JUSTICE'S OFFICE FOR VICTIMS OF CRIME. THE GRANT WILL ASSIST THE

COALITION OVER THREE YEARS IN IMPLEMENTING AN EFFECTIVE STRUCTURE FOR

COMBATTING HUMAN TRAFFICKING LOCALLY AND INCREASE THE QUALITY OF VICTIM

SERVICES. CIS WILL IMPLEMENT TRAINING AND AWARENESS EFFORTS IN

SCHOOLS.

MENTORING - TO PROVIDE STUDENTS WITH A ONE-ON-ONE RELATIONSHIP WITH A

CARING, RELIABLE ADULT TO ADDRESS UNMET NEEDS AND PROVIDE A LINK

BETWEEN EDUCATORS AND THE COMMUNITY. THIS GIVES STUDENTS THE

OPPORTUNITY TO FOCUS ON LEARNING WHILE TEACHERS ARE MORE FREE TO TEACH.

TUTORING - TO PROVIDE STUDENTS WITH ADDITIONAL ACADEMIC HELP, AS WELL

AS ENCOURAGE AND MOTIVATE THEM TO SUCCEED.

EXPENSES \$ 206,947. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND ANY NECESSARY

CHANGES ARE MADE PRIOR TO FILING. A COPY OF THE 990 IS PROVIDED TO BOARD

MEMBERS PRIOR TO FILING.

FORM 990, PART VI, SECT	ION B, LINE 12C:	
BOARD MEMBERS ARE REQUI	RED TO ANNUALLY DISCLOSE	ANY POTENTIAL CONFLICTS OF

AN ACTION WHERE THEY MAY HAVE AN INTEREST OR PERCEIVED INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

THE CIS-HOT BOARD OF DIRECTORS CONDUCTED A SALARY COMPARISON FOR THE CEO IN 2016 THAT SHOWED THE CEO IS PAID ON PAR WITH PEERS IN OTHER TEXAS CIS PROGRAMS AS WELL AS OTHER LOCAL EXECUTIVE DIRECTORS. INFORMAL DIALOGUE WITH OTHER LOCAL NON-PROFITS SHOWS THAT THE ORGANIZATION'S CEO AND OTHER KEY EMPLOYEES' SALARIES ARE COMPARABLE TO THE LOCAL MARKET.

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, THE CONFLICT OF INTEREST POLICY, AND FINANCIAL

STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

Form **8868** (Rev. January 2017)

Department of the Treasury

Internal Revenue Service

Application for Automatic Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

				Enter file	er's identify	/ing number		
Type or print	COMMUNITIES IN SCHOOLS					Employer identification number (EIN) o		
File by the	OF THE HEART OF TEXAS			**-**3411				
due date for filing your return. See	he for Number, street, and room or suite no. If a P.O. box, see instructions. S			Social security number (SSN)				
instructions.								
Enter the	Return Code for the return that this application is for (file	e a separa	te application for each return)					
Applicati	ion	Return	Application			Return		
ls For		Code	Is For			Code		
Form 990) or Form 990-EZ	01	Form 990-T (corporation)			07		
Form 990)-BL	02	Form 1041-A	08				
Form 472	20 (individual)	03	Form 4720 (other than individual)	09				
Form 990)-PF	04	Form 5227	10				
Form 990)-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11				
Form 990)-T (trust other than above)	06	Form 8870			12		
• If this box 1 I re for	organization does not have an office or place of business is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ▶ quest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year or X tax year beginning SEP 1, 2017	Group Exe and atta JUL organizati	emption Number (GEN) I uch a list with the names and EINs of Y 15, 2019, to file on's return for: d endingAUG 31, 2018	f this is fo i all memb the exem	r the whole ers the extension of organiza	ension is for.		
2 If th	If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Final return							
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						-		
nor	nonrefundable credits. See instructions.				\$	0.		
b If th	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					_		
est	estimated tax payments made. Include any prior year overpayment allowed as a credit.			3b	\$	0.		
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,								
by using EFTPS (Electronic Federal Tax Payment System). See instructions.				3c	\$	0.		
Caution: instructio	If you are going to make an electronic funds withdrawal ns.	(direct de	bit) with this Form 8868, see Form 8	453-EO ai	nd Form 88	79-EO for payment		
LHA F	or Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		Form	8868 (Rev. 1-2017)		

INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0045

MAIL TO: DEPARTMENT OF THE TREASURY